

**Application for Registration of Locally Licensed
Electrical Contractor, Fire Alarm Contractor, or Sign Specialty Contractor**

113

Michigan Department of Labor & Economic Growth
Bureau of Construction Codes & Fire Safety
Electrical Division
P.O. Box 30255
Lansing, MI 48909
517/241-9320

OFFICE USE ONLY

FEE: \$25.00

Authority: 1956 PA 217
Completion: Mandatory
Penalty: License will not be issued

The Department of Labor & Economic Growth will not discriminate against any individual or group because of race, sex, religion, age, national origin, color, marital status, disability, or political beliefs. If you need help with reading, writing, hearing, etc., under the Americans with Disabilities Act, you may make your needs known to this agency.

Instructions:

- Complete and sign this application. **Type or print in ink.**
- **A copy (front and back) of your current contractor license and current master or specialist license must accompany this application.**
- Complete enclosed Construction Lien Recovery Fund Membership Application, if appropriate. Submit application and payment to address provided on membership application.
- Social Security Number: A person may be exempt from providing this information under 1996 PA 236. A person is not required to include this information when exempt under this act from obtaining a social security number or for religious convictions prohibiting the disclosure of this information.
- Enclose a check payable to the **State of Michigan** for the fee indicated above.
- Mail completed application, **copy of locally issued licenses** (front and back) and fee to the above address.

Applicant Information

COMPANY NAME		TELEPHONE NUMBER ()	
ADDRESS	CITY		
TOWNSHIP	COUNTY	STATE	ZIP CODE
NAME OF CONTRACTOR OF RECORD			
ADDRESS	CITY		
TOWNSHIP	COUNTY	STATE	ZIP CODE
NAME OF QUALIFYING MASTER ELECTRICIAN, FIRE ALARM SPECIALTY TECHNICIAN, OR SIGN SPECIALIST		LICENSE NUMBER	

Construction Lien Fund - Electrical Contractor or Fire Alarm Contractor Only

An applicant for an electrical contractor or fire alarm contractor license shall also pay the amount required to be paid under the 1980 PA 497, the Construction Lien Act.

Have you paid into the Construction Lien Fund? ☐ Yes ☐ No

If yes, provide the name and license number under which the fee was paid.

Name _____ License Number _____

If no, you must complete the enclosed Construction Lien Recovery Fund Membership Application. The completed application and \$50.00 fee must be submitted to the Bureau of Commercial Services, Construction Lien Recovery Fund Program at the address provided on the member application. The application for registration of locally licensed contractors will not be processed until this office receives verification of payment from the Bureau of Commercial Services.

Certification and Signature

I certify the information provided is accurate and true to the best of my knowledge.

OWNER'S SIGNATURE

DATE